FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSIONMAIL Proce OMB NUMBER:

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES AUG 13 2008 PURSUANT TO REGULATION D,

SECTION 4(6) AND/OR UNIFORM LIMITED OFFERING EXEMPTION 110

OMB APPROVAL 3235-0076 April 30, 2008 Section Estimated average burden hours per response.. SEC USE ONLY Washington, D¢ Date Received

Name of Offering (check if this is an amendment and name has changed, and indic	eate change.)
Kimco Income Fund II REIT Offering of Common Shares	PROCE
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 50	
Type of Filing: New Filing Amendment A PASIC INFORMATION D	SEP 11
A. BASIC IDENTIFICATION DA	
1. Enter the information requested about the issuer	THOMSON
Name of Issuer (Check if this is an amendment and name has changed, and indicate Kimco Income Fund II REIT	change.)
Address of Executive Offices (Number and Street, City, State, Z	ip Code) Telephone Number (Including Area Code)
c/o Kimco Realty Corporation, 3333 New Hyde Park Road, New Hyde Park, NY 11042	(516) 869-9000
Address of Principal Business Operations (Number and Street, City, State, Z	ip Code) Telephone Number (Including Area Code)
· · · · · · · · · · · · · · · · · · ·	
N/A Brief Description of Business	
N/A Brief Description of Business To provide risk capital for, and make investments in the securities of, privately held and To invest in a limited partnership that acquires, improves, develops, leases, maintains, ovexchanges and otherwise deals in and with real estate investments and to engage in any contents.	vns, operates, manages, mortgages, holds, sells,
N/A Brief Description of Business To provide risk capital for, and make investments in the securities of, privately held and To invest in a limited partnership that acquires, improves, develops, leases, maintains, ovexchanges and otherwise deals in and with real estate investments and to engage in any of Type of Business Organization	vns, operates, manages, mortgages, holds, sells, ther activities necessary, related or incidental thereto.
(if different from Executive Offices) N/A Brief Description of Business To provide risk capital for, and make investments in the securities of, privately held and To invest in a limited partnership that acquires, improves, develops, leases, maintains, overchanges and otherwise deals in and with real estate investments and to engage in any office of Business Organization corporation	vns, operates, manages, mortgages, holds, sells,

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Kimco Realty Corporation					
Business or Residence Address	(Numb	er and Street, City, State, 2	(ip Code)		
3333 New Hyde Park Road, New	Hyde Park, NY 1	1042			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Henry, David B.		••••			
Business or Residence Address	(Numb	er and Street, City, State, Z	Zip Code)		
c/o Kimco Realty Corporation, 3	333 New Hyde Par	k Road, New Hyde Park, N	NY 11042		
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☑ Trustee	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Pappagallo, Michael V.					
Business or Residence Address	(Numb	er and Street, City, State, 2	Cip Code)		
c/o Kimco Realty Corporation, 3:	333 New Hyde Par	k Road, New Hyde Park, N	NY 11042		
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	□ Trustee	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividuat)			•	
Cooper, Milton					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
c/o Kimco Realty Corporation, 3:	333 New Hyde Par	k Road, New Hyde Park, N	NY 11042		
Check Box(es) that Apply:	□ Promoter	⊠ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Zurich American Insurance Com	pany				
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
1400 American Lane, Tower I Fl	19, Schaumberg, I	IL 60196			
Check Box(es) that Apply:	□ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Knights of Columbus					
Business or Residence Address	(Numb	er and Street, City, State, 2	(ip Code)		
I Columbus Plaza, New Haven,	CT 06510				
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or
Full Name (Last name first, if inc	lividual)				Managing Partner
Business or Residence Address	(Numb	er and Street, City, State, Z	(ip Code)		

			•	B. INF	ORMATIC	ON ABOU	r offeri	NG				
												No
1. Has the is:	suer sold, o	or does the is	ssuer intend	l to sell, to	non accredit	ted investor	s in this of	fering?				3
			Ans	wer also in	Appendix,	Column 2,	if filing und	der ULOE.				
2. What is th	e minimun	investmen	t that will b	e accepted	from any in	dividual?					\$ 5,000,0	000 **
											Yes N	No
3. Does the o	offering per	mit joint ov	vnership of	a single un	it?	***************************************						3
4. Enter the iremuneration agent of a bropersons to be Full Name (L.	for solicita ker or deal listed are a	ition of pure ler registere issociated p	chasers in c d with the S ersons of st	onnection v SEC and/or	vith sales of with a state	securities or states, 1	in the offeri ist the name	ing. If a per of the brol	rson to be li ker or deale	isted is an a	issociated than five (person or
N/A												
Business or R	Residence A	ddress (Nu	mber and S	treet. City.	State, Zip C	Code)	• •			-		
				, ,	,,							
Name of Ass	ociated Bro	ker or Deal	er									
777133	ociaica isi	mer or isea.										
States in Whi	ch Person	Listed Has S	Solicited or	Intends to	Solicit Purc	hacere	<u> </u>					
		or check in									All States	;
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	[HI]	JIDJ
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	(NE)	[NV]	[NH]	[N]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI] Full Name (L	(SC)	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
i un Manie (i.	ast name n	ist, ii iiidivi	iduai									
13 1 1		11 01			0	 						
Business or R	tesidence A	adress (Nu	mber and S	treet, City,	State, Zip C	(ode)						
Name of Acco		.b										
Name of Ass	ociated Bro	ker or Deal	er									
States in Whi		Listed Has S or check in								п	All States	:
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	JIDJ
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[Wi]	[WY]	[PR]
Full Name (L	ast name fi	rst, if indivi	dual)									
Business or R	lesidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	ode)						
Name of Asse	ociated Bro	ker or Deal	er			· <u>-</u>						 -
States in Whi	ch Person I	Listed Has S	Solicited or	Intends to	Solicit Purcl	hasers					· · ·	
(Check ".		or check in									All States	•
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[111]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	(WY)	[PR]

^{**} Subject to the discretion of the issuer

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

 Enter the aggregate offering price of securities included in this offering and the to already sold. Enter "0" if answer is "none" or "zero." If the transaction is an excl check this box and indicate in the columns below the amounts of the securities and already exchanged 	nange offering,	
Type of Security	Aggregate Am Offering Price	ount Already Sold
Debt	ss	
Equity	\$ <u>125,000,000</u> \$	33,500,000
□ Common □ Preferred		
Convertible Securities (including warrants)	\$ \$	
Partnership Interests		
Other (Specify)	\$ \$	
Total	\$ <u>125,000,000</u> \$	33,500,000
Answer also in Appendix, Column 3, if filing under ULC	DE.	
2. Enter the number of accredited and non-accredited investors who have purchased offering and the aggregate dollar amounts of their purchases. For offerings under the number of persons who have purchased securities and the aggregate dollar am on the total lines. Enter "0" if answer is "none" or "zero."	securities in this Rule 504, indicate ount of their purchases	Aggregate Pollar Amount of Purchases
Accredited Investors	<u>5</u> \$ <u>3</u>	3,500,000
Non-accredited Investors	<u></u> \$	
"		
Total (for filings under Rule 504 only)		
Answer also in Appendix, Column 4, if filing under ULC		
3. If this filing is for an offering under Rule 504 or 505, enter the information reques sold by the issuer, to date, in offerings of the types indicated, the twelve (12) mont to the first sale of securities in this offering. Classify securities by type listed in Parameters.	ths prior	
Type of offering		Oollar Amount
Rule 505	Security S	Sold
Regulation A	S	
Rule 504	\$	
Total	\$	
4. a. Furnish a statement of all expenses in connection with the issuance and distribt securities in this offering. Exclude amounts relating solely to organization ex. The information may be given as subject to future contingencies. If the amou is not known, furnish an estimate and check the box to the left of the estimate.	penses of the issuer, nt of an expenditure	
Transfer Agent's Fees	□ \$	
Printing and Engraving Costs		
Legal Fees		200,000
Accounting Fees		
Engineering Fees		
Sales Commissions (specify finders' fees separately)		
Other Expenses (identify)Blue sky filing fees		250
Total		200,250

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ŧ	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."			\$ <u>12</u>	24,799,750
ı	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.		Payments to Officers, Directors, & Affiliates		Payments To Others
	Salaries and fees		\$		\$
	Purchase of real estate		\$		\$
	Purchase, rental or leasing and installation of machinery and equipment		\$		\$
	Construction or leasing of plant buildings and facilities		\$		\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$		\$
	Repayment of indebtedness		\$		\$
	Working Capital		\$		\$
	Other (specify): To invest in a limited partnership that acquires, improves, develops, leases maintains, owns, operates, manages, mortgages, holds, sells, exchanges and otherwise deals in and with real estate investments and to engage in any other activities necessary necessary, related or incidental thereto	o	\$	Ø	\$ <u>124,799,750</u>
	Column Totals		\$	Ø	\$ <u>124,799,750</u>
	Total Payments Listed (Columntotals added)		⊠ \$	124,	799,750

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Kimco Income Fund II REIT	By: Stool A Our H	August 8, 2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Scott G. Onufrey	Vice President	

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

